

# One Buncombe Fund Grant Application Copy of Application Questions



## One Buncombe Fund Grant Application

Welcome to the **One Buncombe Fund Grant Application**.

The One Buncombe Grant Fund helps small for-profit businesses based in Buncombe County and affected by COVID-19 reopen and rehire staff through grants. Please note that funds are limited and not all who apply will be awarded. The eligible grant amount will be based on firm size:

**Up to \$2,500** for firms retaining or re-hiring **one position** (including owner positions, sole proprietors, and other solopreneurs)

**Up to \$5,000** for firms retaining **more than one position**

**Applications must be completed and submitted no later than 11:59 PM on Sunday, February 28.** Applications submitted after the deadline or that are incomplete (i.e., missing required uploads) will not be considered. **All applications must be submitted using the online form** at <https://form.jotform.com/MtnBiz/1bf-grant-application>. If you are having any issues with the online form, please contact [1bf@mountainbizworks.org](mailto:1bf@mountainbizworks.org)

If you run into any problems with the application, please check the FAQs and documentation at the Fund website, <http://mountainbizworks.org/1bf>. You can also schedule an appointment with a technical assistance provider through that site. *The help desk will close at 5pm on Friday, February 26.*

All applications completed and submitted before the deadline will be considered equally. There is no benefit to rushing an application. We encourage applicants to take their time to ensure a complete and well-supported request.

### **Before you begin:**

This document is a copy of the application, provided so that you can preview the application questions and prepare your responses before starting the application. Again: you can only submit the application via the [online form](#); this Word doc is to help you prepare your responses and write content that you can copy/paste into the online form. Doing so has the added benefit of ensuring that internet glitches won't cause you to lose your application info while you're working on it.

Please make sure to review the program's [Eligibility Criteria](#) before proceeding with an application.

Please also make sure you have prepared and/or gathered the following required documents:

- Most recent filed tax return (unless business start date was in 2020)
- 2020 profit and loss statement
- A completed copy of [this form](#) listing the positions to be rehired and/or retained and the corresponding wage rates.

When you complete and submit the application, you will receive a copy of the application via email as a confirmation it was submitted.

Thank you for the important work you do in the community and we look forward to receiving your application for the One Buncombe Grant Fund.

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## 1. Eligibility Certifications

Please carefully read and answer the following certifications, to ensure that you are eligible to receive grant funding. **You must be able to answer "yes" for all of the following certifications in this section to be eligible.**

If you have questions about eligibility, or any other part of the form, FAQs and technical assistance are available at <https://mountainbizworks.org/1bf>; a direct link to the [Eligibility Criteria document can be found here](#).

- My business has been in existence since at least October 1, 2020 \*  
 Yes  No
- My business is a for-profit business based in Buncombe County \*  
 Yes  No
- My business has no more than 25 Full Time Equivalent employees \*  
 Yes  No
- I understand that if I receive an award, my business name, award amount, and number of jobs supported will be publicly announced, and I agree to this disclosure. All other information will be kept strictly confidential. \*  
 Yes  No
- If awarded, I agree to report on the financial condition of the business, jobs retained and re-hired (including submission of relevant payroll records), and use of funds received 6 months following the receipt of funds \*  
 Yes  No
- I understand and agree that if I am awarded a grant, the grant funds will only be used for business expenses incurred for business activities in Buncombe County, and which support the retention and/or hiring of the employee positions listed in this application. \*  
 Yes  No

## 2. Individual Applicant (Authorized Representative)

- Name \*  
 First Name  Last Name
- Title \*
- Email \*
- Phone Number \*

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- Gender \*
- Race/Ethnicity \*
- Current Military Status \*
- Primary Language \*

## 3. Business/Organization Information

- Business Name \*  
 Please include DBA if applicable
- Please provide a brief description of your business (max 250 characters)\*

- Website
- Date of Incorporation \*  
 Date
- Legal Status of Business/Organization \*
- Business or Organization Tax ID or EIN \*  
 SSN or ITIN if sole proprietor or self-employed
- Industry (Please choose the industry that best fits your business)
  - Agriculture
  - Artists, Musicians & Other Performers
  - Bars, Restaurants, Cafes, Bakeries, & Other Foodservice
  - Breweries/Distilleries/Wineries
  - Construction and Trades
  - Educational and Childcare Services
  - Entertainment/Event Venues and Event Services
  - Galleries & Museums
  - Gyms and Fitness
  - Health Services
  - Manufacturing
  - Media
  - Personal Care (e.g. Salons, Spas, Wellness)
  - Professional Services
  - Real Estate
  - Recreation
  - Retail
  - Technology
  - Transportation
  - Warehousing, Distribution, and Wholesaling
  -

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- Business Mailing Address \*

Street Address  
 City  State  
 Zip Code

- Business County

▼

- Physical Address is Same as Mailing Address

- Business Physical Address (if different from mailing address)

Street Address  
 City  State  
 Zip Code

## 4. Funding Request and Jobs Impact

How much are you requesting from the One Buncombe Grants Fund, and how will that help you retain or re-hire living wage positions in your business? As a reminder: firms retaining or re-hiring one position (including owner positions), including sole proprietors and other solopreneurs may receive up to \$2,500; businesses retaining and/or rehiring 2 or more employees may receive up to \$5,000. These grants are tied directly to helping to retain and re-hire Living Wage positions in Buncombe County.

- A) Funding Amount Requested \*

Please enter a number between 500 - 5000; only numerical values, no dollar signs or commas needed.

- B) How many FTE (Full Time Equivalent) employees do you currently have (as of February 1, 2020)? \*

1 full time employee = 1 FTE; 1 part-time employee = .5 FTE

- C) How many Living Wage jobs will you be able to re-hire with the support of this grant? \*

- D) How many Living Wage jobs will you be able to retain with the support of this grant? \*

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- **E) Living Wage Jobs Retained/Re-Hired Detail Spreadsheet**  
Please download and fill out a copy of this spreadsheet - [LINK HERE](#) - and upload it below, to provide details for our review team about the Living Wage positions that will be retained and/or re-hired through your requested grant funding.
- Upload your Jobs Retained/Re-Hired Detail Spreadsheet Here: \*
- F) How will receiving these funds help you retain/re-hire these positions? (Max 600 Characters) \*

## 5. Financials & COVID Impact

- A) What were your 2020 Annual Gross Revenues (total income)? \*
- B) What were your 2020 Annual Expenses (total expenses)? \*
- C) Please describe how COVID-19 has negatively affected your business, including any necessitated changes in operations. (Max 600 characters) \*

- D) What is the current operating status of your business?
  - Temporarily closed  Open, but with reduced hours or offerings
  - Maintaining regular hours and offerings  Permanently closed
- E) Please briefly summarize your plan to make it through the next 6 months. (Max 600 Characters) \*

- F) If you have received any other COVID disaster relief grants or forgivable loans, please check the box(es) next to any funding you've received
  - PPP First Draw  PPP Second Draw  EIDL Advance Grant  Buncombe County Tourism Jobs Recovery Fund Grant  NC MURR Grants  NC Job Retention Grant  North Carolina Arts Council Artist Support Grant (ASG)  RETOOLNC Grant

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- G) Please upload your most recent tax return here. If you incorporated in 2020 and have not yet filed one, you may skip this question. \*

[Browse Files](#)

- H) Please upload your 2020 Year-End Profit & Loss Statement. \*

[Browse Files](#)

## 6. Business Leadership Information

- A. Ownership details: Please list all individuals with a 20% or greater ownership stake in the company. Include name, ownership percentage, and city and state of primary residence.

*I.e. Jane Smith, 75%, Swannanoa, NC*

- B. Is the business minority-led (50% or more of the owners or directors identify as persons of color)? \*

Yes  No

- C. Is the business woman-led (50% or more of the owners or directors identify as women)? \*

Yes  No

## Certifications of Accuracy and Signing of Application Form

- Anything else you would like to share? (max 250 characters)
- I certify that receiving this grant will enable my business to retain or re-hire employees at or above the Living Wage rate and retain those positions for at least 6 months. (The Just Economics 2020 Living Wage rate is \$15.50/hr without employer-provided health insurance, \$14.00/hr with employer-provided health insurance; owner-employees are exempt from the Living Wage requirement.) \*

- I certify that all of the information submitted in this application is valid, accurate and complete. A photographic or facsimile copy of this authorization may be deemed to be equivalent of the original. \*

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REMINDER: You must fill out the online application at <https://form.jotform.com/MtnBiz/1bf-grant-application> in order for your submission to be received. Filling out the online application form is the \*only\* way to submit your application. If you are having any technical difficulties in filling out the form, please contact [1bf@mountainbizworks.org](mailto:1bf@mountainbizworks.org)